

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157070

Entity Name: WAGONMAKER ENTERPRISES, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

7131 HIGH CORNER ROAD
BROOKSVILLE, FL 34602

New Principal Place of Business:

27135 FRAMPTON AVE
BROOKSVILLE, FL 34602

Current Mailing Address:

7131 HIGH CORNER ROAD
BROOKSVILLE, FL 34602

New Mailing Address:

27135 FRAMPTON AVE
BROOKSVILLE, FL 34602

FEI Number: 20-0525322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGONMAKER, JACOB B
7131 HIGH CORNER ROAD
BROOKSVILLE, FL 34602 US

Name and Address of New Registered Agent:

WAGONMAKER, JACOB B
27135 FRAMPTON AVE
BROOKSVILLE, FL 34602 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,ST () Delete
Name: WAGONMAKER, JACOB B
Address: 7131 HIGH CORNER ROAD
City-St-Zip: BROOKSVILLE, FL 34602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,ST (X) Change () Addition
Name: WAGONMAKER, JACOB B
Address: 27135 FRAMPTON AVE
City-St-Zip: BROOKSVILLE, FL 34602

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACOB WAGONMAKER

OWNE

04/29/2005

Electronic Signature of Signing Officer or Director

Date